05-01.01

Docket No. 5702-01017

PATENT APPLICATION, TRANSMITTAL LETTER (Large Entity)

TO THE ASSISTANT COMMISSIONER FOR PATENTS

| Tran | smitted herewith fo | r filing under 35 | U.S.C. 111 and | 37 C.F.R. 1.5 | 3 is the | patent app | lication of: | | | | |
|------|---------------------------------------|--|--|---|------------------------|------------|--------------------|------------|--|--|--|
| Rob | ert M. Krupp, et al | | | • | | | | /846[| | | |
| For: | or: INFLATOR | | | | | | | | | | |
| Encl | osed are: | | | | | | | 5 = | | | |
| | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | |
| | G | | | | | | | | | | |
| _ | | | | | | | | | | | |
| | | | | | | | | | | | |
| | Power of Attorney Information Disclos | uro Statament | | | | | | | | | |
| | Preliminary Amend | | | | | | | | | | |
| - | Other: | | | | | | | | | | |
| | | | | | | | | | | | |
| 91 | 2 2 2 | 4000 | CLÁIMS A | S FILED | | | | | | | |
| () | 1 _ | #Filed | #Allowed | #Extra | | Rate | | Fee | | | |
| į | l Claims | 15 | - 20 = | 0 | x | \$18.00 | | \$0.00 | | | |
| Inde | p. Claims | 4 | - 3 = | 1 | × | \$80.00 | | \$80.00 | | | |
| | iple Dependent C | aims (check if | applicable) | | | | | \$0.00 | | | |
| į į | | | | | | | BASIC FEE | \$710.00 | | | |
| | . i | | | | | TOTAL | FILING FEE | \$790.00 | | | |
| XX | | r is hereby auth v. A duplicate of e amount of overpayment. y additional filin | orized to charge copy of this sheet as ag fees required u n 37 C.F.R. 1.18 | is enclosed. s filing fee. under 37 C.F.I | eposit Ac R. 1.16 a | count No. | 04-1131 Illowance, | | | | |
| Date | ed: 4/30/01 | | | | Xa | menn | Signature | Zm_ | | | |

CC:



CC:

PATENT APPLICATION TRANSMITTAL LETTER

(Large Entity)

Docket No. 5702-01017

TO THE ASSISTANT COMMISSIONER FOR PATENTS

| Transmitted herewith for Robert M. Krupp, et al For: INFLATOR Enclosed are: | r filing under 35 | U.S.C. 111 and | 37 C.F.R. 1.5 | 3 is the pa | atent app | lication of: | 31000 U.S. PTO 09/846004 | | | | |
|---|---|--|--|-------------|-----------|-------------------------------|---------------------------------|--|--|--|--|
| Certificate of Mailing 2 Formalized A certified copy of Declaration Power of Attorney Information Disclose Preliminary Amend Other: | sheets of dra a Signed. Sure Statement | | el No. EL | 713430436 | US | | | | | | |
| | | CLAIMS A | S FILED | | | | | | | | |
| For | #Filed | #Allowed | #Extra | · F | Rate | | Fee | | | | |
| Total Claims | 15 | - 20 = | 0 | x 5 | 18.00 | | \$0.00 | | | | |
| Indep. Claims | 4 | - 3 = | 1 | x \$ | 80.00 | | \$80.00 | | | | |
| Multiple Dependent C | Multiple Dependent Claims (check if applicable) | | | | | | | | | | |
| | | | | | | BASIC FEE | \$710.00 | | | | |
| | | | | | TOTAL | FILING FEE | \$790.00 | | | | |
| ☑ Credit any☑ Charge an☐ Charge the | r is hereby autho | rized to charge opy of this sheet a fees required t 37 C.F.R. 1.18 | t is enclosed. s filing fee. under 37 C.F. | posit Acco | ount No. | 04-1131 llowance, Signature | Zin- | | | | |